Submit Application to the Human Resources Department Please Print or Type



City of Hartford-Human Resources Department

APPLICATION FOR EDUCATION REIMBURSEMENT

IMPORTANT: This application must be received and approved by the Human Resources Department prior to the start of the course.	
1. Employee Name	Are you receiving other financial assistance? Please indicate
2. Classification	9. Are You a Degree Candidate? Yes No If yes, indicate which: Associate BachelorMaster Doctorate
3. Division	Are You Eligible For Veteran's Education Benefits? Yes No
4. Department and Telephone #	11. Cost (Excluding Books)
5. Date of Employment With City	Tuition \$ Other \$ Total \$
6. Circle Years of School Completed:	12. Semester (please circle)
4 5 6 7 8 9 10 11 12 13 14 15 16 17	Spring Fall Summer (Fire ONLY) Beginning Date of Course:///
7. College/University Address:	13. Amount of Reimbursement (Do Not Enter)
	Comment:
Course Title Credits Earned	
14. Explain relevancy of requested coursework to present job or	career aim
15. Applicant's Signature	Date
16. Application Approved by Department Head	Date
17. Application Approved by Human Resources Department	Date
18. Application Rejected for Following Reasons:	Date